

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Wallawa

Cartridge or Bag Filtration

Month/Year: 8 2022

System Name: Lake Shore Wtr # Dev Co ID#: DR4194169 WTP ID: TP-A

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]
1	0	0	0	25		7.7
2						.48
3						55 55
4						.59
5						.81
6						.37
7						.49
8						.66
9						.81
10						.74
11						.92
12						.37
13						.58
14						.89
15						.70
16						.38
17						.62
18						.95
19						.87
20						.92
21						1.08
22						.96
23						.74
24						.63
25						58 .58
26						.77
27						.45
28						.82
29						.87
30						.79
31						.48

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes / No	Yes / No	Yes / No

Notes: PSI = pounds per square inch
 PSID = pounds per square inch difference (before filter - after filter)
 PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID

PRINTED NAME: AMES DURTON
 SIGNATURE: [Signature] DATE: 9-9-2022
 PHONE #: (541) 432-8106 CERT #:



¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

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WTP: **A**
 Disinfection
 Giardia Log
 Inactiv: **1**

System Name: **Lake Shore Wtr. Dev. ^{Co}** ID#: **41** OR **4194169** Month/Year: **8-2022**

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	.6	233	139	8	7.6	48	Y	60
2	.6	233	139	8	7.4	48	Y	60
3	.6	215	129	8	7.6	48	Y	65
4	.5	200	100	8	7.5	48	Y	70
5	.5	280	140	8	7.6	48	Y	50
6	.5	255	129	8	7.2	48	Y	55
7	.6	255	153	8	7.3	48	Y	55
8	.6	233	139	8	7.3	48	Y	60
9	.6	215	129	8	7.5	48	Y	65
10	.6	200	120	8	7.6	48	Y	70
11	.6	200	120	8	7.5	48	Y	70
12	.6	215	129	8	7.4	48	Y	65
13	.5	233	110	8	7.6	48	Y	60
14	.6	215	129	8	7.4	48	Y	65
15	.6	200	120	8	7.3	48	Y	70
16	.6	233	139	8	7.5	48	Y	60
17	.6	255	153	8	7.5	48	Y	55
18	.6	280	168	8	7.3	48	Y	50
19	.6	255	153	8	7.6	48	Y	55
20	.7	200	140	8	7.5	48	Y	70
21	.7	233	163	8	7.6	48	Y	60
22	.6	233	139	8	7.6	48	Y	60
23	.6	200	120	8	7.4	48	Y	70
24	.6	215	129	8	7.3	48	Y	65
25	.6	233	139	8	7.3	48	Y	60
26	.6	233	139	8	7.6	48	Y	60
27	.6	215	129	8	7.7	48	Y	65
28	.6	233	139	8	7.5	48	Y	60
29	.6	215	129	8	7.5	48	Y	65
30	.6	233	139	8	7.7	48	Y	60
31	.6	233	139	8	7.3	48	Y	60

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Return by 10th of following month by email, fax, or mail to:

dwo.dmcce@state.or.us; 971-873-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

Revised July 2018